



## Original communication

# Medical ethics educational improvement, is it needed or not?! Survey for the assessment of the needed form, methods and topics of medical ethics teaching course amongst the final years medical students Faculty of Medicine Ain Shams University (ASU), Cairo, Egypt 2010

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## ABSTRACT

**Introduction:** In the process of our faculty gaining accreditation, the debate concerning the necessity for initiating an integrated course in which medical ethics course is implemented have arouse. Arguments concerning what should this course include, the best timing for this course to be applied, how it should be taught, planned for and mostly for what the students are interested to get out of it.

**Goal:** The main purpose of this work is to identify the ethical needs and ethical dilemmas freshly graduated medical students face at the beginning of their training and their suggestions to seek better educational approaches that can be applied in teaching medical ethics proposed by the medical students themselves throughout the teaching process and after graduation.

**Methods:** It seemed rather appropriate at this stage to carry out an evaluation survey assessing the needs for medical ethics teaching course through the exploration of the opinions of medical students and freshly graduated doctors on ethical issues through a simple survey by using an open ended question questionnaire designed to fulfil the study targeted requirements.

**Results:** 100 volunteers (n = 100) randomly chosen from the fifth year students of our faculty of medicine ASU who had recently studied ethics course in the fourth year (n = 20), interns both junior and senior residents in El Demerdash hospitals (n = 80). 25 questionnaires were excluded due to inappropriate or missing answers resulting in 75% response rate. 60% of the surveyed group favored an integrated ethics course taught throughout the whole academic years study. 56% chose the practical teaching method with problem solving strategies for the daily arising confusing ethical issues to be the best way to teach the course. While 53.4% thought that stuff specialized in medico legal issues were best to teach this course. As regards the highly confusing ethical dilemmas in which they were interested in getting updated feedback about: Confidentiality, doctor-patient relationship and informed consent came first by 69.3%.

**Conclusions:** This study revealed the essential need for a model medical ethics curriculum that responds to students' concerns in addition to providing basic training in moral reasoning and ethical decision making to be applied both horizontally and vertically across the whole years of medical school.

**Recommendations:** A Simple booklet containing recent version of the Egyptian code of ethics, common ethical dilemmas and recently evolving ethical issues should be available for all newly graduated health professionals.

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## 1. Introduction

In his book Philosophical Medical Ethics Gillon (1996) said that "Our increased understanding and knowledge of diseases, their etiologies, treatment and the social and psychological factors

associated with them, have highlighted the need for doctors to be aware of the commonly occurring ethical issues in medicine and principles that guide their management.<sup>1</sup>

Considering the increasingly competitive and terribly stressed environment that health care professionals experience in their medical institutions nowadays, the essential need of these institutes to ensure high ethical standards in medical education and appropriate training plans had become rather a difficult task.

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**Table 1**  
Response amongst volunteers who took the questionnaire.

Volunteers	Response ( <i>n</i> = 75)	Total ( <i>n</i> = 100)	100%
Fifth year students	17	20	85%
Interns	58	80	72.5%

Doctors often plead that they are in a tearing hurry and have no time for proper social niceties needed in modern medical practice. Trust and respect are essential to the doctor–patient relationship. They are missing from the medical students' learning experiences in bedside medicine.

There is a remarkably growing interest in the field of medical ethics education among the health care professionals. Though, the content of medical ethics courses and ways of teaching them vary considerably from country to country and even within countries.<sup>2</sup>

Medical students seem to learn the science of physical examination and clinical procedures during their training courses, but they are seldom taught the art of sympathy and humanity. However, teaching ethical issues in classrooms would serve no purpose unless ethics in real life situations is actively observed, discussed and practiced during their training.<sup>3</sup>

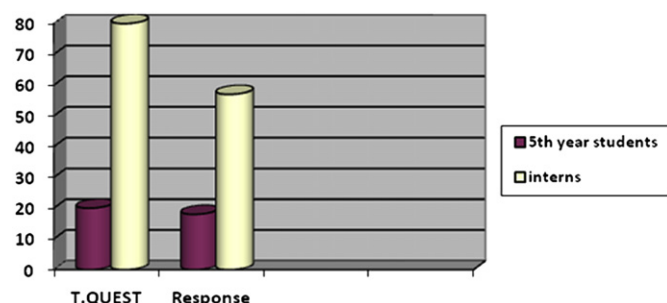
On the commencement of our faculty accreditation process debates have aroused concerning the urging necessity to initiate an integrated teaching course in which medical ethics will be included. Various arguments were concerned with this course contents, applications, how and when should it be taught and mostly for what the students need to be taught in this aspect.

Especially when the faculty has granted the mission of preparing a trained physician, researcher and lifelong tutor capable of following standards of medical care and ethics, with managerial and technical skills in his specialty. (Faculty Of Medicine Ain Shams University Mission).

Thus all our medical students should acquire the knowledge and understanding of ethical and legal issues relevant to the medical practice. They should be able to understand and analyze ethical problems so as to enable patients, their families, society, and their fellow doctors to have proper regard to such problems. Biggs (2003) describes this as the 'alignment' of teaching, learning activities, and assessment with the intended learning outcomes of a course of study decisions.<sup>4</sup>

Researchers in Bahrain stated that the medical trainees made use of a structured curriculum in biomedical ethics and that the implementation of this course may serve as a case study for training and teaching postgraduates in the area of medical ethics.<sup>5</sup>

Offering a formal medical ethics education is a widespread feature of medical curricula throughout the study area. However, the kinds of programmes, especially with regard to integration into clinical teaching, were greatly diverse. A total of 89 medical schools (89%) reported offering some courses in which ethical topics were



**Histogram 1.** Response amongst volunteers who took the questioner.

**Table 2**  
When do you think the ethics course is best placed in your studying curricula choices percent distribution.

When do you think the ethics course is best placed in your studying curricula?	Response	%
Optional	2/75	2.6
In practical years only (4th,5th,6th)	16/75	21
4th year only	12/75	16
Throughout the whole studying years	45/75	60

taught. Separate medical ethics courses were mostly offered in all countries, and the structure of vertical integration was divided into four patterns. Most deans reported that physicians' obligations and patients' rights were the most important topics for their students. However, the evaluation was diverse for more concrete topics.<sup>6</sup>

## 2. Objectives

The main purpose of this work is to identify the ethical needs and ethical dilemmas that interest and face both the freshly graduated doctors and the medical students at faculty of medicine Ain Shams University, Cairo, Egypt. Their suggestions to seek better educational approaches that can be applied in teaching this course.

## 3. Goals

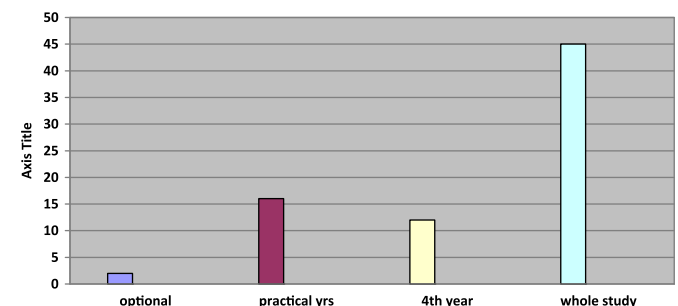
We are targeting the launching of a medical ethics course to be integrated throughout the whole academic study in our faculty in addition to the planning of providence of continuous medical ethics education courses addressed to senior staff members.

We needed to decide: What to teach in the medical ethics course? Whom it should be taught to? When should it be launched? What are the best teaching methods suggested? How should it be taught?

## 4. Methods

It seemed rather appropriate at this stage to carry out an evaluation study assessing the needs for medical ethics teaching course through the exploration of the opinions of medical students and freshly graduated doctors on ethical issues through a simple survey by using an open ended question questionnaire designed to fulfill the study targeted requirements.

The questionnaire was created and reviewed for content validity, then pilot-tested with volunteers to assess the instrument in terms of time required for completion, language and user-friendliness. Based on feedback, the questionnaire was modified and finalized. It was administered to 100 students (*n* = 100).



**Histogram 2.** When do you think the ethics course is best placed in your studying curricula choices percent distribution.

**Table 3**

Whom do you think is better to teach you this course choices percent distribution.

Whom do you think is better to teach you this course?	Response	100%
Any medical teacher	5/75	6.7
Forensic teacher	21/75	28
Lawyer	9/75	12
Forensic teacher experienced in bioethics	40/75	53.3

Twenty ( $n = 20$ ) volunteers were chosen from the fifth year medical students who had taken their ethics course at our forensic department in their fourth year and they have also started experiencing their first practical clinical courses for their preliminary arising conflicts in their doctor–patient relationship.

Eighty volunteers ( $n = 80$ ) were chosen from the newly graduated interns that have already started their year of excellence that involves their daily dealing with ethical related issues and who were assigned for a single medical ethics lecture upon commencement of this year as a refreshing course.

Completion of the questionnaire was voluntary but also it was also marked as a criterion for inclusion in the study and all the respondents were reassured that their responses would be confidential.

## 5. Results and discussion

100 volunteers ( $n = 100$ ) were randomly chosen from the fifth year medical students at our faculty ( $n = 20$ ) and interns in Ain Shams Universities (ASU) Educational hospitals ( $n = 80$ ). 25(25/100) questionnaires were excluded from the study due to the presence of inappropriate or missing answers resulting in 75% response rate amongst all. (Table 1 and Histogram 1).

60% of the responders in the study favored an integrated ethics course to be taught all through the academic years study. 21% favored an extended integrated study throughout the practical years (fourth, fifth and sixth years) of medical school. While 16% thought that it is better for the course to be a fourth year course only as it already is with distinctive mode of teaching. Only 2.6% went for the suggestion of the course being an optional course. (Table 2 and Histogram 2).

53.4% chose the stuff specialized in medico legal issues to be the best choice for teaching this course. While 28% were in favor of the forensic teacher and 12% chose lawyer to better teach them the course while any medical teacher choice came last by 6.6%. (Table 3 and Histogram 3).

56% chose the practical teaching method with problem solving strategies for the daily confusing ethical issues arising in the course

**Table 4**

How would you prefer the course to be taught choices percent distribution.

How would you prefer the course to be taught?	Response	%
1. Lectures	5/75	6.7
2. Small groups study	10/75	13.3
3. Cases and solution	18/75	24
4. Daily confusing issues problem solving	42/75	56

of their practice for better outcome of this course. (Table 4 and Histogram 4).

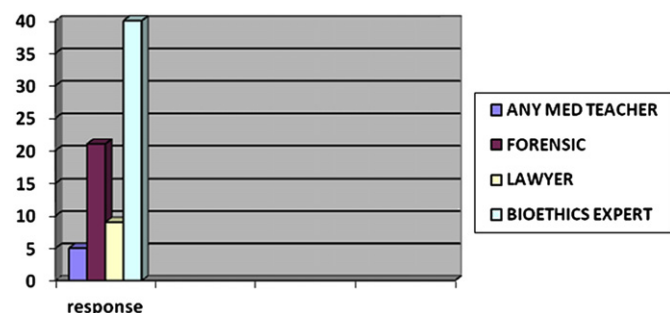
As regards the highly confusing ethical dilemmas in which the responders were interested in getting updated feedback about:

- Confidentiality and doctor–patient relationship, informed Consent came first by 69.3%.
- Death issues, mechanical ventilation dealing with euthanasia, palliative therapies and death certification came second by 14.7%.
- Organ transplantation legalities and prohibitions, stem cell therapy came third by 9.3%.
- Abortion legalizations came last by 6.7%. (Table 5 and Histogram 5)

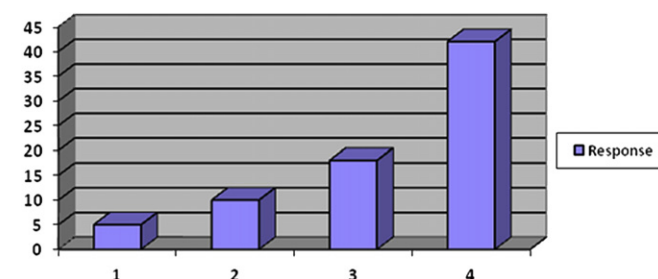
The current state of ethics education does not insure a common standard for ethics education. Teachers of ethics have obligations not just to teach the subject matter but also to help create an academic environment in which well motivated students have reinforcement of their inherent good qualities. Interdisciplinary teaching should be encouraged. Priority should be given particularly to the ethical aspects of daily medical practice problems faced by the students themselves.

The University of Basra Medical College had introduced a course on medical ethics for undergraduate students in 1994 where they explored the opinions of 54 graduates and 52 final year medical students about the benefits they perceive they gained from the course and its relevance to their training or practice.

About 31% of students and 34% of graduates thought the course was practically and theoretically useful. Over 80% of graduates and students thought the course was either very relevant or relevant to some extent to the practice of medicine. When asked to recall the important ethical issues taught in the course, 52% of graduates and 44% of students listed patient–doctor relationship. Confidentiality, physician liability and ethical issues concerning recent medical innovations were listed by few respondents. Only 6% of both graduates and students were able to list the four principles of medical ethics as described by Raanan. The self-learning component of the course should be developed to strengthen ethical reasoning and judgment in decision making.<sup>7</sup>



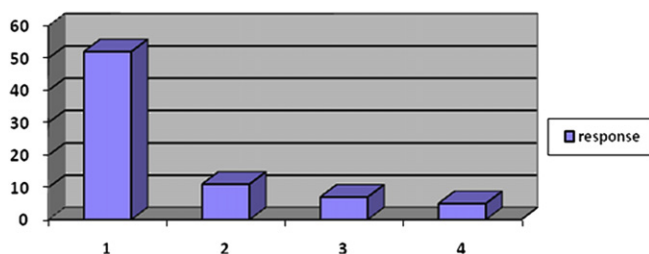
**Histogram 3.** Whom do you think is better to teach you this course choices percent distribution.



**Histogram 4.** How would you prefer the course to be taught choices percent distribution.

**Table 5**  
What matter concerns you most in regards to ethics choices percent distribution?.

What matter concerns you most in regards to ethics?	Response	%
1. Confidentiality, doctor–patient relationship and informed Consent	52/75	69.3
2. Death issues, mechanical ventilation dealing with euthanasia, palliative therapies and death certification	11/75	14.7
3. Organ transplantation legalities and prohibitions, stem cell therapy	7/75	9.3
4. Abortion legalizations	5/75	6.7



**Histogram 5.** What matter concerns you most in regards to ethics choices percent distribution.

## 6. Conclusions

This study revealed the essential need for a model curriculum that responds to students' concerns in addition to providing basic training in moral reasoning and ethical decision making to be applied both horizontally and vertically across the whole years of medical school in order to convey the message that competence in medical ethics is central to being a doctor together with the urgent need for Continuous Medical Education (CME) courses initiation for senior staff.

## 7. Recommendations

A Simplified booklet containing recent version of the Egyptian code of ethics, common ethical dilemmas and recently evolving

issues should be available for all newly graduated health professionals.

The Essential need for initiating an online medical ethics forum regularly updated giving basic medical ethical issues and providing advice towards physicians facing ethical issues and discussing arising dilemmas.

Faculties of medicine in Egypt should be encouraged to start providing postgraduate degrees in bioethics to start medical ethics departments and comities and newly graduated doctors should be encouraged to specialize in medical ethics.

## Ethical approval

Consent was obtained from Ain Shams Universities Educational hospitals quality unit to be integrated as part of the plan for improvement of the newly graduated doctors and none was needed for the fifth year students as it was considered part of our departmental student feedback and needs assessments following their forensic course fulfillment in fourth year.

**Method of analysis:** The analysis of numerical data was carried out using Microsoft Excel.

## Funding

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## Conflict of interest

None declared.

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